

New Jersey Office of the Attorney General

Division of Consumer Affairs
Fantasy Sports Unit
124 Halsey Street, 7th Floor, P.O. Box 45056
Newark, New Jersey 07101
(973) 273-8077

Instructions for Fantasy Sports Operator Permit Application

- 1. Pursuant to N.J.S.A. 5:20-1 et seq., all businesses seeking to conduct "fantasy sports activities" (as defined by N.J.S.A. 5:20-2) in the State of New Jersey, must apply to the Division of Consumer Affairs (Division) for the issuance of a permit.
- 2. This application must be completed and filed with the Division to determine if a permit will be issued.

Please forward to:

Division of Consumer Affairs
Fantasy Sports Unit – 7th Floor
124 Halsey Street, P.O. Box 45056
Newark, New Jersey 07101

- 3. Enter all information and answer all questions completely. It is your responsibility to ensure that the information provided in this application is complete, accurate and truthful. Failure to provide complete, accurate and truthful information may result in delays or denial of the application.
- 4. Please attach relevant documentation and explanation sheets if necessary.
- 5. The application must be dated and signed by an authorized individual of the operator. All entities and individuals identified on this application have the affirmative responsibility and continuing duty to cooperate in any inquiry or investigation conducted by the Division and to provide any assistance or information requested or required by the Division.
- 6. Enclose a check made payable to the "State of New Jersey" for a nonrefundable, nontransferable application fee in the amount of \$ 500.00.
- 7. Once the application has been approved by the Division, you will receive a Permit Activation Form. Please complete the Permit Activation Form and submit the annual permit fee in the form of a check or money order, payable to the "State of New Jersey", in the amount set forth in the Permit Activation Form. The annual permit fee shall be based upon the Applicant's "fantasy sports gross revenue" (as defined by N.J.S.A. 5:20-2) from the previous year in accordance with the following schedule:

- 8. A holder of a Fantasy Sports Operator Permit shall renew the permit not later than twelve (12) months after the date of issuance.
- 9. Sign the application in the presence of a notary public. Your application must be notarized or it will be returned to you, which will delay the permitting process.
- 10. Information that you provide on this application (including the address of record) may be subject to public disclosure as required by the Open Public Records Act (OPRA).



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Fantasy Sports Operator Permit Application

Please print clearly.		Date completed:					
Section 1 - Fantasy Sports Operator Information							
Name of Applicant:							
Doing Business as (DBA) or Trading as (TA):				e initial			
Main Business Address:							
Main Business Address:Street address	City	State	ZIP code	County			
Telephone number:(Include area code)	Fax number:						
(Include area code)			(Include area code)				
Federal Employer Identification Number:	We	bsite address:					
Mailing Address: (If different from main business address.) Street address	City	State	ZIP code	County			
Applicant's Primary Contact person:		_Position/Titl	e:				
Address:Street address							
Street address	City	State	ZIP code	County			
Telephone number:(Include area code)	Email address:						
Date of incorporation or formation:							
State of incorporation or formation:		_					
Attach articles of incorporation or formation, by- State of incorporation or formation and certificate of au	laws, operating agn	reement, goo	od standing of State of New .	ertificate from Jersey.			
Applicant's Fiscal Year:							
Attach a copy of the Applicant's most recent financial a	udit.						

Attach a copy of the Applicant's contract with a certified public accountant designated to perform an annual financial audit.

If the Applicant is a corporation, limited liability corporation, partnership or any other form of legal entity authorized to conduct business provide: (please attach separate sheets)

- 1. The name, including former or assumed names, the address of the corporate headquarters and Federal ID number.
- 2. The names, addresses and dates of birth of officers, directors, managing members, members, partners and persons holding a 10% or greater interest in the Applicant. (Here after referred to as "Interested Individuals or Entities.")
- 3. A current organizational chart.
- 4. The name and address of the Applicant's registered agent in New Jersey.

Section 2 - Fantasy Sports Operator History

Spo	ovide a detailed description of the Applicant's business, including the background and skills of the Applicant as a Fantasy orts Operator. Include a detailed statement concerning the experience of the Applicant and Interested Individuals or tities in the operation of Fantasy Sports Activities.
An	swer the following questions with regard to the Applicant and its Interested Individuals or Entities:
1.	Has the Applicant or any of its Interested Individuals or Entities ever been arrested, detained, charged, indicted, admitted into pretrial intervention, pled nolo contendere or convicted of a crime or offense involving the operation of Fantasy Sports Activities or any crime or offense involving theft or deception or fraudulent practices? \[\textstyle{\textstyle{100}} \text{Yes} \textstyle{\textstyle{100}} \text{No} \]
	If Yes, identify the individual or entity and provide the details, case, jurisdiction, date of offense, docket number, judgment number. Please attach a copy of the judgment of conviction, and a copy of a certificate or rehabilitation, if received.
2.	Are there any charges involving the crimes or offenses noted above pending against the Applicant or any Interested Individual or Entity? \Box Yes \Box No
	If Yes, identify the individual or entity and provide the details regarding the date, the place, the facts leading to the arrest or indictment and the court in which the matter is pending. Please attach all relevant documents.
3.	Has the Applicant or any of its Interested Individuals or Entities been determined by a government agency in any jurisdiction to be delinquent with regard to the payment of any debt or tax within the last ten (10) years? \Box Yes \Box No
	If Yes, identify the individual or entity and provide the details. Please attach all relevant documents.
4.	Are there any pending disputes that the Applicant or any Interested Individuals or Entities have with a government agency in any jurisdiction with regard to the payment of any debt or tax? Yes No
	If Yes, identify the individual or entity and provide the details. Please attach all relevant documents.

5.	Has the Applicant or any of its Interested Individuals or Entities been a party to any civil lawsuit in any jurisdiction within the last ten (10) years related to the operation of a fantasy sports activity? \Box Yes \Box No
	If Yes, identify the individual or entity and provide the details, case, jurisdiction, docket number and judgment number. Please attach all relevant documents.
6.	Has the Applicant or any of its Interested Individuals or Entities ever had a fantasy sports activity related license, permit, approval or registration denied, limited, restricted, not renewed, suspended or revoked in any jurisdiction within the last ten (10) years?
	If Yes, identify the individual or entity and provide the details. Please attach all relevant documents.
7.	Is the Applicant or any of its Interested Individuals or Entities currently a party to any administrative action in any jurisdiction pertaining to a fantasy sports activity in which license, permit or other authorization is subject to denial, limitation, restriction, non-renewal, suspension or revocation? \Box Yes \Box No
	If Yes, identify the individual or entity, and provide the details. Please attach all relevant documents.
8.	Has the Applicant or any of its Interested Individuals or Entities been subject to a civil judgment, or administrative action, in any jurisdiction relating to a violation of any federal, state, county, or municipal laws entered against it in the last ten (10) years?
	If Yes, identify the individual or entity and provide the details and include any case, jurisdiction, docket number and judgment number. Please attach all relevant documents.
9.	Has the Applicant or any of its Interested Individuals or Entities been a party to any bankruptcy, receivership or similar proceeding affecting a business or in an individual capacity in any jurisdiction within the last ten (10) years? \Box Yes \Box No
	If Yes, identify the individual or entity and provide the details and include any case, jurisdiction, docket number and judgment number. Please attach all relevant documents.

10	. Has the Applicant or any of its Interested Individuals or Entities been a party to any material acquisition, reorganization, merger, consolidation, readjustment or succession of a business within the last ten (10) years? \[\sum \text{Yes} \sum \text{No} \]
	If Yes, identify the individual or entity and outline the facts and circumstance concerning this matter. Please attach all relevant documents.
Sec	tion 3 – Fantasy Sports Activity History
1.	Has the Applicant operated fantasy sports activities in the State of New Jersey on or before August 24, 2017?
	(If Yes, the Applicant may continue to operate up to 60 days after the application becomes available. If the Applicant has applied for a permit during this 60 day period, it may continue to operate while the application is pending.)
2.	Describe each type of fantasy sports activity offered or proposed to be offered to persons located in the State of New Jersey.
3.	Does the Applicant currently possess or has the Applicant at any time possessed, a fantasy sports activity license,
٥.	permit, approval or registration issued by any other state or licensing authority? \square Yes \square No
	If Yes, list the type of license, permit, approval or registration, the state or licensing authority that issued it, the license, permit or registration number, and the name and telephone number of the appropriate contact person at the issuing authority.
4.	Will a casino licensee or licensed racetrack use its facilities to accept entry fees or pay prizes? Yes No
	If Yes, state the details of the arrangement and provide copies of any contracts or agreements and provide documents which form the basis of this arrangement.
5.	Will the Applicant partner with or enter into a contract with a casino licensee to offer fantasy sports activities?
	Yes No
	If Yes, state the details of the arrangement and provide copies of any contracts or agreements and provide documents which form the basis of this arrangement.

Section 4 - Participant and Operating Accounts Information

- 1. Identify the procedures the Applicant has established as to the following and provide supporting documents which demonstrate that:
 - A. Participants' funds are segregated from the Applicant's operational funds.
 - B. Funds in participants' accounts are not the property of the Applicant and are not available to the Applicant's creditors.
 - C. Unauthorized withdrawals from participants' accounts by the Applicant or others are prevented or cannot otherwise occur.
 - D. Participants can permanently close his/her account at any time and for any reason.
 - E. Participants can withdraw the funds maintained in his/her individual accounts within five (5) days of the request being made.
 - F. Prizes won by a participant are deposited into the individual accounts of the participant within twenty-four (24) hours of winning the prize.
 - G. Participants are notified of his/her right of and are provided with access to his/her play and account history.
- 2. Submit an irrevocable letter of credit, bond, or combination thereof in the amount of the participants' deposit accounts issued to the Applicant for the benefit and protection of participants' funds held in the fantasy sports activity accounts.
- 3. State and attach documentation of the following for the last three (3) years:
 - A. Total annual deposits made by the participants.
 - B. Total annual prizes awarded to the participants.
 - C. Total annual payment processor fees paid by Applicant.
 - D. Total annual receivables.
 - E. Total annual cash reserves.
 - F. Total annual cash equivalents.

Section 5 – Compliance Procedures

1.	Describe and attac	ch the Applic	ant's practices	, policies,	and procedures	to prohibit	underage	participants	(less
	than 18 years of ag	e) from partic	ipating in fanta	isy sports a	ctivities.	•	C		

- 2. Describe and attach the Applicant's policies, procedures, and rules for each fantasy sports activity which ensure that the outcome will be determined by statistics generated based upon the performance of actual individuals participating in real competition or athletic events.
- 3. Describe and attach the Applicant's policies, procudures, and rules for each fantasy sports activity which ensure that all prizes offered to participants are established and disclosed in advance of participant's payment of an "Entry Fee" (See definition of "Entry Fee" at N.J.S.A. 5:20-2).

4	. Describe and attach the Applicant's policies, procedures, and rules which ensure that the outcome of each fantasy sports activity is not based solely on the performance of an individual athlete, or on the score, point spread, or any performance of a single real team or combination of real teams.
5	. Describe and attach the Applicant's practices, policies, and procedures which will prohibit sharing with third parties statistical information that could affect a fantasy sports activity until that information is publicly available.
(Describe and attach the Applicant's practices, policies, and procedures to ensure that any "Prohibited Participant' does not participate in fantasy sports activities. (See the definition of "Prohibited Participant" at N.J.S.A. 5:20-2).
7	. Describe and attach the Applicant's practices, policies, and procedures to ensure that fantasy sports activities do not include high school athletics.
8	. Describe and attach the method by which an individual is advised he/she can restrict himself/herself from participating in fantasy sports activities and the procedures established to prevent that individual from participating.
(9. State the number of entries a participant may submit to each fantasy sports activity and set forth the procedure that will prevent the participant from exceeding that number.
	10. Provide the location and identify all technical equipment used by the Applicant, including computers and servers, to conduct fantasy sports activities.
	11. Provide a description, in detail, of the intended uses and purposes of the server(s) located in Atlantic City, New Jersey

12. Describe and attach the Applicant's practices, policies, and procedures to prevent cheating and collusion.
13. Describe and attach the Applicant's practices, policies, and procedures to determine the total "Entry Fees" collected from participants located in the State of New Jersey.
14. Describe and attach the Applicant's practices, policies, and procedures to respond to any security incident, including system failure, loss of service, breaches of confidentiality, and malicious intentions.

AFFIDAVIT

This affidavit is to be executed by the Applicant before a notary public: County of: Applicant's Designee as OI Applicant's Name provisions of Title 5 of the General Statutes of New Jersey and any applicable Rules and Regulations of the Division of Consumer Affairs, swear (or affirm) that I am authorized to act on behalf the Applicant, I am at least 18 years of age, and that all information provided in connection with this application is true to the best of my knowledge and belief. I understand that any omissions, inaccuracies or failure to make full disclosures may be deemed sufficient to disqualify the Applicant or to withold renewal of or suspend or revoke a permit issued by the Division of Consumer Affairs. I am familiar with the Laws governing the operation of fantasy sports found in N.J.S.A. 5:20-1 et seq., and I further swear (or affirm) that I have read N.J.S.A. 5:20-1 et seq., together with any applicable Rules and Regulations of the Division of Consumer Affairs, and fully understand that in receiving a permit from the Division, I bind the Applicant to be governed by them. Furthermore, on behalf of the Applicant, I voluntarily consent to a thorough investigation of the Applicant, together with its officers, directors, managing members, members, partners and persons having a 10% or greater interest in the Applicant for the purpose of verifying the Applicant's qualifications for a fantasy sports permit. I further authorize all institutions, employers, agencies and all governmental agencies and instrumentalities (local, state, federal or foreign) to release any information, files or records requested by the Division of Consumer Affairs. On behalf of the Applicant, I understand and agree that the Applicant is under a continuing duty to disclose any changes in the information submitted to the Divison of Consumer Affairs. Print the Name of Applicant's Designee Print Title or Position Signature of Applicant's Designee Sworn and subscribed to before me this **Affix Seal Here** day of Name of Notary Public (please print) Signature of Notary Public Do not write in this space Date received Permit number ___